REST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application or Docket Number

09/937562

	CLAIMS AS FILED - PART I							SMALL ENTITY					
	TOTAL OLD		(Col	(Column 1) (Column 2)				TYPE	L EN	7	_	TO CALL	IER THAN
	TOTAL CLAIMS							RAT	ΕT	FEE		R SMA	LL ENTIT
	FOR	:	NUM	BER FILED	NUM	IUMBER EXTRA		BASIC					
	TOTAL CHAR	GEABLE CLAIM	s 35	33 minus 20= * .		- 13					-J°	BASIC	- 300
	INDEPENDEN	T CLAIMS	12	/			+	X\$ 9=				R X\$18	= 234
	MULTIPLE DE	PENDENT CLAIN	A PRESENT				4	X40	=		0	X80=	240
ľ							ل	+135	=		OF	+270	
	If the differen	nce in column 1	is less than	ess than zero, enter "0" in column 2				TOTA	-			<u></u>	
1	•	CLAIMS AS	AMEND	IDED - PART II							JOF		100
1		(Column 1	(Colum	(Column 2) (Column 3)			SMAL	L EN	ENTITY OF		SMAL	R THAN L ENTITY	
A BACKLOS CALL	MENTA	REMAINING AFTER AMENDMEN		NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	TK	DDI- ONAL		RATE	ADDI TIONA
	Total	•	Minus	# in		=	7 [X\$ 9=				X\$18=	FEE
	Independen	1	Minus	4		=	1 F	X40=	╁		OR	 	
	FIRST PRE	SENTATION OF	MULTIPLE D	EPENDENT (CLAIM]	A40=	+-	- <u> </u>	OR	X80=	
								+135=			OR	+270=	
				1.			A	TOTA DDIT. FEI			OR	TOTA ADDIT. FEI	
Ir	NE SCHOOLINE	(Column 1)	EZ EL COMO DE LA	(Column	12) (Column 3)						ADDII. FEI	-
AMENDMENT B		REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOUS PAID FO	R	PRESENT EXTRA		RATE	AD TIOI FE			RATE	ADDI- TIONA
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											DR 🛦	TOTAL	
_	Pungangan pengangan	(Column 1)	The second	(Column 2		Column 3)		DiT. FEE			A	DDIT. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSI PAID FOR	LY	PRESENT EXTRA	F	ATE	ADD TION FEE	AL	-	RATE	ADDI- TIONA
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• #	the entry in colum	+1	35=		OF	۱ ۱	-270=						
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Tetal as Indian 1).										OF	حسا ۲	TOTAL	
T	he "Highest Numb	per Previously Paid	For (Total or	Independent) is	than 3, o	enter "3." est number fo	ound in	the appro	opriate	box in c	ADI Imuloc	DIT. FEE L n 1.	-